ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

St Francis Hospital Beech Grove

City: Beech Grove County: Marion Year: 2004

Provider Type: General Acute Hospital

I. Inpatient Care				
Hospital Service Description				Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	18	503	4,243	\$8,453
ICU Med/Surg	15	225	4,608	\$23,705
ICU Neonatal	31	274	3,995	\$31,694
ICU Pediatric	0	0	0	\$0
Medical/Surgical	284	14,890	76,047	\$3,769
Neonatal Intermed	0	0	0	\$0
Obstetrics	35	2,568	6,928	\$6,717
Pediatric	20	418	1,238	\$3,198

Psychiatric	0	6,362	7,477	\$1,021
Rehabilitation	18	383	3,041	\$7,648
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	421	25,623	107,577	NA
Normal Newborn	40	2,249	4,788	\$1,540

II. Outpatient Visits				
Circulatory System	32,604	Digestive System	10,096	
Endocrine System	38,727	Injuries and Poison	24,443	
Mental Disorder	11,227	Musculoskeletal	30,767	
Neoplasms	14,025	Nervous	9,274	
Respiratory	17,090	Urinary	17,994	
Other/Unknown	175,932	Total Visits	382,179	
Number of Visits to Emergo	47,195			
Percent of Emergency Department Visits of Total Visits			12.3%	

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Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	Y - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
Y - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractice Service
N - CT Scanner	Y - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	Y - Home Health Service
Y - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
N - Magnetic Resonance (MRI)	Y - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
N - Opthalmic Surgery	N - Optometric Service	N - Organ Bank
Y - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	Y - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
Y- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	Y- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure NR =		Not reported

<u>Health Care Regulatory Services</u>

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